

CLAIMS ONLY							Application Number 0948437		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1	1						51				
2		1					52				
3							53				
4	cancel						54				
5							55				
6		1					56				
7							57				
8		1					58				
9							59				
10	cancel						60				
11							61				
12							62				
13	cancel						63				
14							64				
15	cancel						65				
16							66				
17		1					67				
18							68				
19		1					69				
20							70				
21							71				
22							72				
23							73				
24							74				
25							75				
26	cancel						76				
27							77				
28							78				
29							79				
30							80				
31							81				
32							82				
33		1					83				
34							84				
35		1					85				
36							86				
37		1					87				
38		1					88				
39		1					89				
40		1					90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	2						Total Indep				
Total Depend	21						Total Depend				
Total Claims	23						Total Claims				